

without injury. As the recovery went on rapidly, considering the extreme prostration of the system, no precaution was taken to prevent the solution from getting into the stomach; on the contrary, it was rather to be desired than otherwise.

Another interesting case was treated by me last spring in the same manner, and with equal benefit. It was an infant about a week old, extremely weak and feeble; so much so, that it was unable to draw the breast. Astringent and other applications were first used, as alum, borax, goldthread, pyrola, &c. Laxatives, as magnesia, castor oil, and even calomel and rhubarb, were administered, but the aphthæ increased daily, until I resorted to the use of a strong solution of the nitrate of silver. By this article the crust was removed, leaving the surface beneath of a florid red, and in some places slightly ulcerated, or rather in a state that is termed a *raw surface*.

This article seems to be superior to every other for two reasons: 1st, the rapidity, with which it removes the aphthæ; 2d, its altering the action of the surface to which it is applied. The above mode of practice is my own. I was led to adopt it from having seen repeatedly its good effects in indolent ulcers of the legs, and in some cases of inflammation of the eye. It is likewise my whole dependence in a peculiar *ulcer of the nipple*, which has a resemblance to aphthæ of the mouth. To conclude, I remark that there are four surfaces to which lunar caustic may be applied, viz., the surface of the eye, the mouth and fauces, the nipple, and the glans penis. I think I am warranted in making this conclu-

sion, from my experience of the article in question, and from a similarity of structure which I think exists in these parts.

Yours, sir, with the highest esteem, E. EMMONS.*

III.

VACCINATION AND RE-VACCINATION.

The prize recently offered for the best dissertation on Smallpox, Varioloid, and Vaccination, has been awarded to Dr. Stephen Brown, of New-York. This dissertation contains as compendious and clear a statement of the established laws observed by these diseases, and is on the whole as valuable a treatise on the subject, as we have seen. The following conclusions of Dr. Brown are of sufficient importance to claim the particular attention of the profession.

Conclusions.

"1st. THAT the smallpox is a disease of very ancient date, and had its origin in the east.

2d. That the character of this terrible disease, in its unmodified state, has undergone no change, since its description by Rhazes.

3d. That the successful mode of treating the smallpox, during the pustular stage, by puncturing the unripe pustules, as practised from the earliest times by the *Brahmins*, was never adopted by European practitioners.

4th. That the varioloid is a modification of the smallpox, and excited, in the system of those persons who have received but a *partial impression* from vaccination, by variolous poison.

5th. That those persons labor-

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ing under the varioloid will communicate the genuine, unmodified smallpox to those who have no protection either by previous smallpox or by vaccination; and that it is capable of exciting the varioloid in persons who have received but a *partial impression* from vaccination.

6th. That the smallpox virus is capable of affecting the inferior animals, especially during those *epidemic periods* when *atmospheric causes* give a more virulent character to the disease, and occasion a more rapid and general extension of its poison.

7th. That in some, at least, of the feathered tribes, it puts on a more severe and fatal character than in man, and that in quadrupeds a much milder form.

8th. That the *kinepox* in the cow, and the *grease* in the horse, are diseases produced in these animals, originally, by the operation of the variolous poison through their system, and that both impart their respective diseases to the human subject, and that each proves *equally* effectual in protecting the system against the smallpox.

9th. That the modifying effect which the smallpox virus receives in passing through the system of these animals, appears to be permanent; as no change in its mild character is perceptible, after a successive operation through the human system for more than thirty years.

10th. That the kinepox has proved a complete preventive of the smallpox, in the majority of cases, where vaccination has been performed by regular practitioners, even in the ordinary way of vaccinating in all seasons, and

with lymph obtained by disturbing the regular progress of the vaccine vesicle, which may be regarded as a dangerous interference with vaccination.

11th. That those cases where smallpox has supervened to vaccination, have, in the great majority of cases, been a very mild disease, and seldom, if ever, death has occurred under its influence; and had we no means of lessening this comparative number of susceptible cases, it could afford not a shadow of an argument against the practice of vaccination.

12th. But we aver that these cases can be diminished even to an insignificant number, by attending properly to their true causes, *two* of which, viz., the *laceration* of the *vesicle* and the *phlegmatic habit*, have heretofore been entirely overlooked, therefore,

13th. The dry crusts should always be employed for the purposes of vaccination, and great caution enjoined that the vesicle be not lacerated in its forming stage.

14th. The months of November and December present the finest season for vaccinating; and the summer months should be avoided.

15th. All children of phlegmatic parents, and all persons of the phlegmatic habit particularly, should be re-vaccinated, or have a *second insertion*, agreeably to the method proposed by Mr. Bryce, and *repeated* until a full impression be made upon the system; and if it be necessary at any time to take lymph from the vesicle to vaccinate others, as when exposed to the smallpox, a second insertion should be made in the opposite arm.